

13

# Insanity.—Past, Present, And Future.

BY

**T. DUNOAN GREENLEES, M.D., F.R.S.E.**

A

**PRESIDENTIAL ADDRESS**

DELIVERED TO

The Grahamstown and Eastern Province Branch

OF THE

British Medical Association.

1903.

---

PRINTED AT GRAHAMSTOWN ASYLUM PRESS.



## Insanity.—Past, Present, and Future.

—O—

GENTLEMEN,—

My first duty is one of pleasure, and it is to thank you for the honour you have conferred upon me in electing me your President for the past year; this is the more gratifying as my attendances at your meetings, owing to my absence from the Colony and my illness, have not been what they should have been; still more do I feel the honour, because, your proposal that I should accept the position of President, came to me when on a sick-bed.

To have been twice President of the Grahamstown and Eastern Province Branch of the British Medical Association, within a few years, is a unique experience, and one which any man might well be proud of. The British Medical Association is becoming more and more powerful in the shaping of medico-political matters; its only danger is, that it will become so powerful, that the originality of the individual will be lost in the general body; and its functions, as an Association of Medical men, may become one less of scientific research than it has been in the past. While our interests need looking after, while we do require a self-protecting society, and while we want occasionally means to meet together and discuss social and medical matters, we should never forget the fact that this Association is formed for the purpose of advancing the knowledge of Medicine and its allied sciences, and any policy apart from this should be looked upon with the intensest suspicion, lest we degenerate into a money-making trades union society. That important changes are being introduced into the Rules and Regulations of the Association is clearly indicated by the action of the home Associations; the proposal to raise the subscription when the financial condition of the Association is in a most flourishing condition, and the introduction of a rule compelling every member of the Association to be likewise affiliated to some Branch, prove that the Rules are undergoing serious alterations, and we, as a branch, should let our ideas be known, either supporting the parent Association, or else lodge our protests; or finally, sever our connection with the B. M. A., and perhaps affiliate ourselves with the South African Medical Association,—at present in a moribund condition.

My second duty to you as your President, is the delivery of an address; in the selection of a Presidential address I believe, that the chief point to be attended to is the choice of a suitable subject,—a subject of general interest, and not one of any special character. A review of the work done in the Branch during the past year, a prophetic view of the future of the Branch and its capabilities for



good,—either subject might have been useful material out of which to form a Presidential address, but then such subjects rightly come under the province of our Secretary, and his report should indicate our past, and our future should be gauged from it.

The consideration of some question dealing with medicine, or one of its allied sciences, always proves an intellectual treat to a meeting of medical men, but then specialism, strictly speaking, is known only to a few, and an address like this should be founded upon a subject known to the many.

It was but natural that, in searching for material out of which to manufacture a Presidential address, I should have my attention directed more particularly to that branch of medicine to the study of which I have devoted 19 years of my life; in an address we should endeavour to avoid controversial questions, and I, therefor, decided that the subject matter of my address should be the consideration of the history of insanity, rather than the discussing of any one of the many questions that occur to me when the medical aspects of the subject is considered.

Now, the History of Medicine has not received that academic attention worthy of it. Why have we not endowed chairs in our British Universities, and the subject made a compulsory one in the medical student's curriculum? Why should America be ahead of Britain in a matter that assuredly most concerns the latter country, for I note in one Educational centre in the States at least, the History of Medicine gets due attention? No novel forms more interesting reading than this, and no medical education should be considered complete without a knowledge of the progress medicine has made in the past ages. If we knew more of the doings and writings of our medical fore-fathers, perhaps we would be less ready to propound new theories, and invent new methods of treating disease. Our present knowledge is but the sum total knowledge of our fore-fathers, in a more elaborated form. It has been accumulating year by year, the noble edifice has been added to, brick by brick as it were, until it would now seem as if the acme were reached, and we might cry with astonishment: "Excelsior! we have reached the summit," only to realise that true science has no summit, has no limit, and the more we learn, the more there is to learn. That man is a fool who says he knows all there is to know, in even any one of the branches of medical knowledge, and his statement is but proof of his own ignorance and conceit.

Is it not in the experience of every one of us, in making our daily rounds, that constantly novel ideas are cropping up, that we are continually learning something new of this body of our's and its ailments, and that new symptoms and rare diseases appear even to the oldest and most experienced among us?

The history of insanity is even more interesting than the history of medicine or surgery, for even in the earliest days of the

world, superstition surrounded the insane as with a halo, and that directed special attention to this disease in all times. I have thought therefore, that a brief review of the Past, Present, and Future of Insanity, might prove an interesting and useful study to us this evening; and I have accordingly selected it as the subject matter of my Presidential Address.

In all the ages of the world's history, man has lived, as it were, two lives; one pertaining to the affairs of this world, and one the affairs of the next. Man has, even in a savage condition, striven after a knowledge of the great hereafter, and whether his devotions are directed towards alleviating the wrath of an offended Deity, or, whether his worship is that of the souls of his dead ancestors, the fact remains, that we have, and always have had, a spiritual side to our characters. Anything partaking of the supernatural, or wonderful, must claim our veneration, and the insane, with their weird visions, and prophetic sayings, must, in all times, have had a marked influence on the emotions of the race. Insanity, being of its nature, spiritual or intangible, was easily, in ancient times, ascribed to supernatural influences, or the possession of devils, or of gods, or of animals; thus it was, that, while some looked upon the insane with respect and veneration, others looked upon them with loathing and fear, according to the type of the insanity.

The history of insanity may well be considered as being divided into four great epochs, and this is the plan adopted by M. Regis, in his interesting work on Mental Diseases:—

(1). That period previous to any Medical literature at all,—an epoch during which insanity was considered as emanating from the gods, and its treatment, when there was any, confined to the influence of the priests, dating from the beginning of the world's history to the time of Hippocrates.

(2). That epoch from the time of Hippocrates to the end of the Roman Empire, during which the Hippocratean, and Alexandrian Schools influenced thought; this period includes the Græco-Roman period, and during which civilisation made considerable progress, and the knowledge of insanity and its treatment came to be recognised and dealt with more from medical stand-points.

(3). The period embraced by the "Middle Ages" during which ignorance raged rampant, the knowledge of insanity reverted to the superstitions of the earliest times of the world's history. This epoch extends from the hundredth year of the Christian era to the end of the eighteenth century.

(4). The fourth period in the history of insanity dates from the time of Pinel, (born 1775), to the present time, during which insanity, like the other sciences, has been raised to the position of a science, and the foundations of its treatment medical, rather than corrective.



Finally, we shall endeavour to view the future of insanity, founding our remarks on our knowledge of the progress it has made during the past 20 years.

#### FIRST PERIOD.

Evidence is extant, from references to the Bible, Egyptian writings, Herodotus, Euripides, and even Homer, that disorders of the mind were as common then as perhaps they are now, and a study of the writings from some of these sources may be of interest, when they bear upon our subject.

*The Bible.*—The first reference made, in the old Bible, to insanity is to be found in Deuteronomy, Chapter 28, verse 28, in which, after detailing the blessings that follow obedience to the Mosaic Law, various curses are hurled at those who fail to comply with the commandments of the Lord,—“The Lord shall smite thee with madness and blindness, and astonishment of heart.” That insanity should be included among the plagues that result from neglect of the moral law holds good now just as much as it did in those ancient days!

Perhaps the most interesting mad personage in Biblical history, is that of King Saul. Hack Tuke quotes many verses from the Bible, showing that Saul’s insanity was of considerable duration, and that he was a man of most impulsive temperament, even at his best. On the day of a battle with the Phillistines he “caused his men to fast,” and we know well, that even in these days, Tommy can’t fight so well on an empty stomach, as he can after a good dinner! Again, when the evil spirit, or as it has been interpreted, “the melancholy spirit” came upon him, “he stripped off his clothes, and prophesied before Samuel, and lay down naked all that day and all that night, (Sam. l., 19th chapter, 24th verse,)—certainly not a very dignified position for a king of a war-like nation! That the Israelites believed in “the possession theory” of insanity is proved by the fact that Samuel said to Saul, “Behold, now an evil spirit from God troubleth thee.” (Sam. l., 15th chapter, 15th verse.)

It is argued that Samson was an epileptic, and in this connection, it is interesting to note, that according to Parkhurst, the word MAD itself is Hebrew, and applied to insane persons on account of their supposed supernatural strength. The term has likewise been applied to the ecstatic raptures displayed by many of the prophets when making their prophesies.

And, again, there are many curious instances recorded in the Bible, of conduct ascribed to the later prophets, that, in those days at all events, could only be due to insanity; but we must remember, in this connection, that the habits and ways of the people in these days are not the same as they were in those, and what were then national customs, would now be considered as eccentric, if not altogether mad.

It is possible, however, and we will give these prophets credit for it, that they simulated insanity, so that their teachings might have the greater influence with the people; for, believing madness to be “a spirit from God,” they the more readily gave heed to their prophetic admonitions.

Mr. Rawlinson says: “there are many tablets in the British Museum, brought from the Nineveh Library, relating to insanity and its cure. It is called “head-sickness” [note what the Dutch in this country call insanity, “mal-cop.”] and the symptoms are described in considerable detail, and with much poetic imagery, but the affliction is supposed to be caused by malignant spirits, and the direction for its treatment are, for the most part, magical. These inscriptions are curious and interesting as embodying the ideas and usages of a very early age. The originals belonged to the primitive Turanians of Babylonia (B. C., 5000-2000,) the copies we now have are accompanied by a Semitic (Assyrian) translation, which may have been made as early as B. C., 1500, and were recopied for the library of Sandanapalus, about B. C., 660.”

Nebuchadnezzar's insanity is one of the most interesting examples we have in ancient history. Nebuchadnezzar was a much afflicted man, for he not only suffered from a most objectionable form of mental disease, but he apparently had also some kind of repulsive bodily disease,—some say it was leprosy. The form of insanity from which he is supposed to have suffered, was, according to Regis, *lycanthropia*, a condition in which the subject loses his identity, and believes himself transformed into a wild animal,—hence the name (*lukos*, a wolf,)—and for seven long years he acted as such, his recovery being one of the most interesting in ancient or modern times. Lycanthropy is referred to in mythology as one of the punishments sent by the gods; Lycaon, king of Arcadia, was one of the founders of the Pelasgian race. He was the first to sacrifice human victims to Jove, and was therefore transformed into a wolf, and wandered in the woods with many others likewise transformed.

In *Ancient Egypt*, similar ideas existed as to the nature of insanity, viz: that it was a possession by demons or gods,—I suppose the question as to which caused the mental trouble very much depended to the social status of the patient, and while they would say the king was affected by the gods, some poor beggar who happened to be insane, would be sure to be possessed by demons!

There is a story of a princess, possessed by spirits, and being cured by the intercession of the god Khons; and temples existed in Egypt, dedicated to Saturn, where the insane were purified to restore them. We further know that evidence exists among the mummies that trephanning was known to the ancient Egyptians, this operation probably being performed to relieve cerebral disease.



The madness of Cambyses, as told by Herodotus, forms an interesting page in ancient history. For the outrage of slaying Apis, he was stricken with the "sacred disease," and under its influence he slew both his brother Smerdis, and sister. After a description of his insane acts, Herodotus concludes as follows:—"Thus it appears certain to me, by a great variety of proofs, that Cambyses was raving mad!" (H. Vol. 2., p. 436.

Euripides describes the insanity of Hercules, who, under delusions, stripped himself naked, fought with imaginary enemies, and declared himself victor; afterwards, in murderous fury, he killed his wife and children. When he recovered, after a sleep, he was full of remorse for his acts; and, from this lucid description it is clear that, if this is a fable, Euripides must have been personally acquainted with Epileptic homicidal mania, of which this undoubtedly was an example. "*Morbus Hercules*" is one of the ancient names of Epilepsy.

Homer's writings contain several graphic and interesting references to the contemporary knowledge of mental disease in his time, and he makes Ulysses feign insanity when the Greeks compelled him to join the army against Troy; yoking an ass and ox together, he began ploughing, Palanedes, however, put him to a severe test, for, taking his son, Telemachus, he placed him in front of the plough, but Ulysses, fearing he would hurt his son stopped the plough.

In the *Iliad*, Bellepheron's melancholy is described as follows:—

"But when at last, distracted in his mind,  
Forsook by Heaven, forsaking human kind,  
Wide o'er the Alcian fields he chose to stray,  
A long forlorn uncomfortable way,  
Woes heaped on woes, consum'd his wasted heart,  
His beauteous daughter fell by Phoebe's dart."

(Pope's versification of the *Iliad*.)

Melancholia was thereafter called "*Morbus Bellepheronteus*."

In some passages Homer uses the term "madness," (*lussa*), to mean "to rage," or "vengeance":—

"Achilles pressed them, vengeance in his heart,  
And all on fire for glory."

(Cowper's *Iliad*, 21, l. 542-3.)



Then again, we have the wonderfully graphic description of the madness of Ajax, as detailed by Sophocles:—

“ ... Raging against the flocks he scourged as men,  
At length he issued from the tent, and held  
Long converse with some shadow ; of the sons  
Of Atreus much, and of Ulysses much  
He spoke, and laughed aloud, how their base deeds,  
He, in this sally, amply had revenged.  
Entering the tent again, his sense at length,  
Slow he regained ; but when he saw the ground  
With carnage covered thus, he smote his head,  
And raised a mournful cry.” (Potter.)

It will be seen from the above quotations, that among the ancients, insanity was a well recognised disease ; the strange conversation and extravagant actions of the madman were, in heathen lands, ascribed to possession by the gods, and even among the Israelites, insanity was said to be due to the possession by the patient of a spirit,—mostly an evil one.

With such a supernatural cause for the mental disease, the superstitious people believed that the ravings of the “ possessed ” were the oracles of the gods, and every endeavour was made to make coherence out of incoherence so that the wishes of the Dieties might be ascertained. It was rare that among the ancients anything approaching cruelty to the insane was practised, but rather, at all events among the more civilised races, they were treated with veneration as fit mouthpieces of the gods, and frequently sacrifices were offered to them, to the end that their influence with the gods might prove of benefit to those sacrificing.

The visions the insane, but more especially the epileptics, so frequently experience, their hallucinations of hearing and seeing, would naturally, to a superstitious mind, convey the impression that the insane see beyond the things seen by ordinary persons : that they, in fact see with their mental eyes, and hear with their mental ears, sights and voices that are readily ascribed to a supernatural origin.

The visions of the ancient prophets, their inspired sermons, may all have originated in the epileptic dreamy state so characteristic of this condition sometimes, and there is no reason why, to my mind, the Dietv should not have desired that his teachings were to be conveyed to the people through the medium of epileptics, who frequently are persons of high mental and intellectual culture.

## THE SECOND PERIOD.

The second period of the history of insanity dates from the time of Hippocrates, the father of Medicine, to the fall of the Roman Empire.

Hippocrates certainly was much before his time in his knowledge of disease, and his writings on insanity are just as advanced as they were two hundred years ago!

Obtaining originally their knowledge of disease and its treatment from Egyp., the Greek physicians introduced the superstitions and incantations of the Egyptian masters as well, so that persons suffering from insanity and other diseases were frequently brought to the Temple of Æsculapius to offer up sacrifices and prayers to the god, in much the same way as lunatics were brought to Holy wells in Britain centuries afterwards.

Hippocrates, it was, who first attempted to disabuse men's minds of the supernatural nature of insanity. "*Morbus sacer*" speaking of epilepsy, "it appears to me to be no more wise, more divine, nor more sacred than other diseases; but has a natural cause from which it originates, like other affections. Men regard its nature and cause as divine from ignorance and wonder, because it is not at all like other diseases."

Hippocrates was the first to attempt a classification of insanity, and we are still making the attempt; he refers to mania, melancholia, and dementia, as distinct and separate conditions. That he recognised the brain as the organ of the mind, and the seat of all mental affections, is proved by the following extract from his works:—"Men ought to know that from nothing else but the brain comes joy, despondency, and lamentation..... and by the same organ we become mad delirious..... All these things we endure from the brain when it is not healthy, but is more hot, more cold, or more moist, or more dry than natural; or when it suffers any other preternatural and unusual affection." (Art., "*the Sacred Disease*," in *Complete Works of Hippocrates*, Syd: Soc.)

In some of the writings ascribed to Hippocrates the use of hellebore,—white and black—is advocated in the treatment of insanity. "to purge the patient of his melancholy humour. Democritus writes that "hellebore, when given to the sane, pours darkness over the mind, but to the insane it is very profitable," and Hippocrates agrees with Democritus, who, from his experiments on animals, expressed the view, that, "from such sources as the gall and bile, madness springs." It is curious, that, even in those days, functional derangements of the liver should have been considered as exercising an important influence on the mind,—"even from such sources madness springs."

Passing over several physicians, we come to Celsus, who wrote extensively on insanity and its treatment. He advised conciliation, rather than coercion, in the treatment of the quieter cases; but, if this failed, then the madman must be bound in chains, flogged, or hungered. With respect to the treatment of melancholics, they were to be diverted from their sadness by sports, amusements, and



everything that conduced to health. Sadness being due to “bad bile,” it was to be treated by emetics, purgatives, starvation and hellebore. Music and reading aloud to the patient were advised, as well as the gentle rocking of a hammock. Such was the position the treatment of insanity occupied at the beginning of the Christian era, among civilised people, and this picture of kindness to the insane contrasts strangely with the brutal superstitions of centuries afterwards, when the “fire-ordeal” was a common method for ascertaining whether a person happened to be insane, or only a witch!

Aretæus, of Cappadocia, who lived after Celsus, has left behind him an interesting memoir on Insanity, in which he distinguishes the various forms of mania and melancholia; and in the latter condition, he noted specially the bodily symptoms, such as constipation, scanty urine, eructations, fetor of breath, smallness of pulse, etc., that accompany this mental state frequently.

Aretæus, in his treatment of insanity, refers to all the good points in the treatment advocated by Celsus, but no mention is made of the flogging, etc., advocated by the latter writer, so that we may consider progress was made in the treatment of the insane; indeed, Coelius Aurelianus, who lived in the second century, A.D., in his treatment of the insane, advised gentle measures, the suppression of coercive methods, and presaged, according to Regis, the non-restraint system of modern times. This philosopher’s advice to those having care of the insane is so advanced, that, even in these days of modern nursing, many of his instructions would prove excellent guides to us now.

Galen, the celebrated physician of Pergamus, who wrote 500 memoirs, gave little attention to the subject of insanity, and, as the Roman Empire was approaching its downfall, the scientific study and treatment of this disease fell into neglect; but an interesting chapter might be written, and has been dealt with by Dr. Ireland on the insanities of the later Roman Emperors. It would seem as if the old sturdy Roman degenerated into the effeminate weakling, in whom disease delights to develop; the luxurious lives that the later Romans led, their neglect of the most ordinary rules of sanitation and morality, undermined them mentally and physically.

Again, the teachings of Hippocrates were forgotten, the insane were looked upon as the oracles of the gods, hogs were sacrificed to the gods to propitiate them, and the insane were sent to Anticyra, rendered famous for its hellebore,—the supposed cure for madness.

Among the nobility, the Roman ladies were accustomed to have imbecile, or even idiotic children as their servants, probably for the purpose of ascertaining the wishes of the gods on some intrigue or other. It must have been somewhat difficult to understand the

gibberings of an idiot and translate them into the oracles of a god, but I presume, when any difficulty was experienced, the services of a priest would be called in, who would interpret the child's babblings in accordance with his own wishes, or those of his employer.

The downfall of the Roman empire threw the civilised world into a period of darkness and retrogression, and this period lasted until the dawn of a new and better civilisation; the dark middle ages, therefore, comprise our

### THIRD PERIOD.

In the history of insanity, which has also been termed an epoch of transition, although, assuredly, there was little of transition in it, for the sun of the reformation rose suddenly upon the darkness of ignorance and bigotry, and there are few, if any, indications that during the dark ages any progress whatever was made in the knowledge and treatment of mental diseases; rather there was a reversion to the beliefs of the ancients, added to which, there was cruelty, such as the Ancients were never guilty of; it was a period of Sorcery, Witches' Sabbaths, demonology, and superstition of the most degraded type.

All the sciences were neglected, and to express a view antagonistic to the Church, meant excommunication, and might mean torture and death.

So far as the insane were concerned, assuredly there was no one to stand up for them; considered in many cases to be wizards and witches, they were tortured and burnt, or drowned, amidst the jeers and laughter of their neighbours. Governments enacted laws for the punishment of witches and the demented, and the priest-ridden people were only too glad to carry out the cruel customs of this period.

During the centuries in which the whole civilised world was plunged in a sea of ignorance and superstition, and up to the 16th century, little or nothing was done to advance the scientific knowledge of medicine. Previous to this, the insane were under the domination and care, such as it was, of the priests and churches. Whereas, the principle of the churches caring for the insane might be right in theory, the priests were so ignorant, that they but treated the insane as in possession of a demon, and employed exorcism, and even cruelties, "to cast out the devil." It is believed that many insane, goaded on by their persecutors, came to believe themselves witches or possessed by devils, and suffered the legal penalty of such possession, being burned at the stake or drowned in the village dam, rather than deny or abandon their delusions.

Epidemics of insanity were not infrequent, and then the loss of life was most severe.



In Dr. Hack Tuke's work on the history of the insane in the British Isles, some interesting information is quoted from early English writers on insanity and its treatment. We find that among the Saxons, peony was good for insanity, and mugwort useful in putting to flight "devil sickness," that is, mental disease arising from a devil.

Peony was used as follows: "for lunacy, if a man layeth this wort peony over the lunatic as he lies, soon he upheaveth himself, and if he have this wort with him, the disease never again approaches him." Mandrake was likewise used, and periwinkle could only be efficacious after a carefully worded invocation to the plant itself.

For "infantile epilepsy," the brain of a mountain goat was to be drawn through a golden ring, and then given to the child to swallow, before "it tastes milk"; it will then be healed.

Wolf's flesh was useful for hallucinations; for idiocy, and "mental vacancy," a brew, consisting of ale and a large number of roots, plants, and holy water, was supposed to be the cure; and, against a woman's chatter, if a man, while fasting, ate the root of radish, then that day the chatter would not harm him.

It will thus be seen, that, in "Merrie olde England," a most crude attempt was made of a classification of insanity, not so perfect as was known to the ancients; and likewise, an endeavour was made to treat the various forms of insanity therapeutically, by means not so rational as they had been hundreds of years before in ancient Rome.

While the medicinal treatment of insanity apparently was not neglected, neither was what we now term the moral treatment of the insane, to which our fore-fathers added an ecclesiastical treatment. Means were taken to drive out the devil, and such means as starvation and whipping were commonly resorted to. In the churches, anointing with holy water, incantations, and the tying of the patient to one of the pillars of the church, were all supposed to be efficacious.

The influence of the moon,—hence the name lunacy,—was considered in olden times to be great, for, when she was at the full, exacerbations of the insanity in those already insane occurred. This supposed influence of the moon is curious, for, even in these latter days, there are many scientific psychologists who believe in this lunar influence; and, assuredly at Fort England I have repeatedly noticed that, when the moon was full, my native patients were unusually restless at night. I would explain this, however, by the fact that a full moon lightening up the dormitories keeps the patients awake, and thus tends to make them restless and excited.

Wells, both for drinking and bathing, were, in these days, as in those, thought to benefit mental diseases. Sir Walter Scott says in “Marmion” :—

“Then to Saint Fillan’s blessed well,  
Whose spring can frenzied dreams dispel,  
And the crazed brain restore.”

And, again, of St. Maree, Whittier says :—

“And, whoso bathes therein his brow,  
With care or madness burning,  
Feels once again his healthful thought  
And sense of peace returning.”

Scotland has always been famous for these “lunatic” wells, and the insane Highlander seems to have had an implicit confidence in their efficacy. Wells, for the cure of the insane, were also known in Ireland, which, to a comparatively recent time, were used in the supernatural treatment of the insane.

Besides, the tying of lunatics to the Church pillars, they were frequently tied to crosses by the wayside; thus, Sir David Lindsay says, and this refers to 400 years ago :—

“They bryng mad men on fuit and horsse,  
And byndes them to Saint Mangose crosse.”

It will be observed from the preceeding remarks, that while the literature bearing on insanity, as regards its treatment, is fairly profuse, there is little or no mention made of its pathology; and, as a matter of fact, the ancient Greeks and Romans knew more of the nature of insanity than did our forefathers, of, about the time, let us say, of Henry VIII.

As time went on, and more especially after the Reformation in England, Monasteries were no longer able to shelter the insane, and then they began to be treated in “mad-houses,” which, in those days, were chiefly of the nature of private Asylums, and patients were detained therein, not for treatment so much, as for the benefit to the proprietor’s pocket; so that the poor insane, were, now even worse off than they were when under the care of the priests.

To give us a fair idea of the condition of the insane in England, and its evolution, one might wisely study the history of the Bethlem Hospital, perhaps the oldest Asylum in Britain. This Hospital was originally a Priory, dedicated in 1247, to St. Mary of Bethlem, and about 1400 it first commenced to receive lunatics.

By and bye, the word Bethlem became corrupted into Bedlam, and a Bedlamite was known throughout London as a madman,—the word often figuring in the works of Shakespeare.

Outside the gates of Bethlem, in the “good old days,” there used to stand, carved in wood, life-sized figures of lunatics, and



over them was written, “*Pray remember the poor Lunatics, and put your charity into the Box with your own hand.*” The Asylums were certainly not a care of the State, but rather, they were supported by the liberality of the public, who paid for their entertainment of seeing “*real live lunatics*”; these Asylums were, in fact, simply show places, where the public paid a small fee to see the madmen in their surroundings of straw, chains, nakedness, and starvation, just as the hanging of a criminal later meant to the public a day’s holiday!

Dr. Allen, who died in 1684, refused to allow the Royal Society to experiment “*upon some mad persons*” in Bedlam, by trying the hitherto untried experiment of the transfusion of blood, and it was in reference to Dr. Tyson, Dr. Allen’s successor, that Garth refers:—

“*The gions of lunatics about him press,  
His province is lost Reason to redress.*”

It will be seen, that about this time, there was a revival of interest in the insane and their treatment, and although it was years before superstition and witchcraft were separated from insanity, still, men were slowly but surely beginning to realise that, in insanity, they had a disease to deal with that had no connection with the supernatural whatever.

It is to the credit of medical men, that enlightened ideas first originated, although, it was to their discredit, that, for so many years the insane were neglected, or left to the charlatanism of the priests, or to the ignorance of the people.

Gradually leading up to, and paving the way for the revolution inaugurated by Pinel in France, and Tuke in England, such men as Sennant, Vieussens, Beerhaave, Sauvages, Lorry, on the Continent, and Sydenham, Willis, and Cullen, in Britain, contributed their labours to the advancement of the approaching dawn of the modern treatment of the insane. The matter of priority in this matter has been discussed over and over again, but there can be no doubt that the world was ready for the great change, and in France and England, at or about the same time, the great revolution in the treatment of the insane was inaugurated. In France, that country of revolutions it was appropriate, that another and more noble revolution should take place, wherein no lives were sacrificed to satisfy men’s passions, or to effect a change in the Government; but rather a revolution in which a disease, hitherto misunderstood, should become understood of men; a disease that, in the past, had been treated with great cruelty, was, for the future, to be treated with kindness and sympathy; and, that thousands of the insane should be liberated from their chains, nakedness, and starvation, and made to feel that they were human beings, suffering from the saddest disease that can befall man; that their treatment was henceforth

to be founded upon a scientific knowledge of the mind and its afflictions.

The progress made towards this discovery was not a rapid one, nor was it one unaccompanied by indications that the care of the insane was in several Institutions undergoing slow but certain revolution.

The dawn of modern civilisation was like the dawn of nature,—slow but certain, the darkness of night was surely dissipated by the bright rising sun of knowledge, but no one could tell when the darkness entirely disappeared, and when day-light first appeared, until they saw that it was bright day-light. So it was with the dawn of a new knowledge of medicine, a knowledge founded upon better times, when the pathology of disease was allowed to progress without the suspicion that the investigator was in league with the devil, and when the treatment of disease was founded upon a surer and more scientific basis.

#### THE FOURTH PERIOD.

We now come to the fourth epoch in the history of insanity,—a period dating from the introduction of what has been called the “non-restraint” treatment of the insane, as introduced by Pinel in France, and Tuke in England, to the present time, and a review of this period, would not be complete, without some reference to the chief actors who have inaugurated the modern treatment of insanity.

While in every country in Europe, there were men who followed closely in each others footsteps, it will be sufficient if we refer more particularly to several of the leading pioneers in this revolution.

Pinel was born in 1775, and became physician to the Insane, at Bicetre, the chief Paris Asylum, in 1793. In this Asylum, as in all other Asylums, the insane were looked upon more as criminals and dangerous animals than suffering members of the human race. They occupied cells, dark, unventilated, and unhealthy, slept on straw that was rarely renewed, were chained to the walls, tables, or bedsteads, when they possessed such luxuries. Frequently their arms, necks, and ankles had heavy chains attached to them, and they were entirely at the mercy of their keepers, who were usually selected, not for their kindly disposition, but for their great strength, and brutal and unsympathetic characters. They were exposed to the mockeries and insults of a curious public, who, in France, had only recently rejoiced at the power the bloody guillotine exercised, in beheading their hereditary foes,—the aristocracy. The very insane habits of the inmates were a source of amusement to a curious and gaping crowd, and their misery assisted in providing recreation for this free people, whose motto was: “Liberty, Fraternity, and Equality.”



Such was the condition of the insane not only in France, but in all civilised countries, England as well, at the time Pinel was made chief physician to the Bicetre. Recognising Insanity to be a disease, he had no hesitation in treating it in the only logical way possible,—viz., by kindness, firmness, and justice. In striking off the manacles, he struck the death-knell of cruelty to the insane for all time, and, in giving them more liberty, better diet, recreations, and useful employments, he established the treatment that has existed ever since his time, and will form the foundation of all future methods of treatment.

Salpetriere, another Paris Asylum, followed in the footsteps of the Bicetre, but this human revolution was slow in its progress, in the other French Asylums, and it was not until 25 years afterwards that the system of non-restraint became universal, and it was due mainly to the teachings of Esquirol, upon whose shoulders Pinel's mantle had fallen, that the insane in France are indebted for increased comforts. Esquirol urged the Government to undertake the erection of more Asylums, and advised the appointment of physicians to supervise them.

In Italy, and Savoy, similar efforts were being made for the amelioration of the insane at the same time, and in England, William Tuke of York, Dr. Conolly of Hanwell Asylum, Gardiner Hill of the Lincoln Asylum, were foremost in abolishing the shackles, and inaugurated the treatment that culminated in the formal abolition, except for medical or surgical purposes, of restraint in 1837.

It will be thus seen that the progress of this revolution was slow, and extended over 40 years; men hesitated, even with the best intentions, to adopt a method of treatment so entirely contrary to that in vogue for centuries, and they raised many arguments against the adoption of the non-restraint system in Asylums.

The introduction of legislation, dealing with the insane, in England, rapidly followed upon the change in their treatment, and, for much now found in our English Statute books, the English must be grateful to the Earl of Shaftsbury; the appointment of Government Inspectors as Commissioners, the election of Committees of Management, and the constant and jealous supervision exercised over the administration of the Asylums by the public and the press, have all combined to raise the status of the Asylum official, and, made the management of English Asylums in this fourth epoch of the history of the insane, regarding which the race may well feel proud, and which is a credit to the philanthropic spirit of the age.

Towards the end of the eighteenth century in Germany two schools of philosophers were formed,—the one sect maintained that

insanity was but the result of sin,—the loss of morality,—and its only cure, the acceptance of religious truths; the other school scouted the spiritual origin of insanity, and held it was associated with physical lesions, and had a physical basis as its origin. As might be surmised, much in the treatment of the insane depended upon the opinions expressed by either of these two sects. If the disease was essentially spiritual in its nature, and due to neglect of the moral law, then it was reasonable to argue that the Church was the proper Hospital for all such cases, and the Priest the proper physician. But if insanity had its origin in some disordered condition of the cerebral functions, or some disease of the viscera, then naturally it was within the province of the medical man to treat.

Fortunately for suffering humanity, the somatic theory of insanity increased its hold upon sensible and scientific men, so that now the physical basis of insanity is the universal belief.

Even in Germany, while these philosophers were waging a theoretical war about the origin of insanity, there were others, of a more practical turn of mind, who were working out the salvation of the insane, and raising insanity from the degraded position of a crime, to the more honoured position of the saddest disease suffering mankind experiences, and its treatment, from cruelty to kindness.

The universal interest shown in the insane in all the countries of Europe, resulted in the erection of a large number of Asylums, and, in England alone, 15 new Asylums were built between the years 1812 and 1841, and, in 1844, there were 20,893 lunatics under official cognisance in 166 public and private Asylums; and to show the rapid decrease of restraint, Mr. Hill, of the Lincoln Asylum, published a table, in which he showed that, whereas, in 1829, with 72 patients, 39 were restrained for a total of 20,424 hours, in 1837, with a population of 130, only 2 patients were restrained, for a total of 28 hours; and, even in spite of this decrease in coercive measures, the visitors report: "that the condition of the patients was much improved, the quiet of the house increased, and the number of accidents and suicides materially reduced in number."

The main question of the treatment of the insane, in so far as restraint or non-restraint are concerned, having been finally and satisfactorily settled, the impulse given to the scientific study and treatment of insanity has gone on steadily, and the care bestowed upon this section of suffering humanity, in all civilised countries is, in my opinion, one of the most extraordinary proofs of the humanitarian age in which we live.



That the race should submit to be so heavily taxed for the care of their insane shows a philanthropic spirit not only in our legislators, but also in the individual, and is an indication that, in the future, if those who have the direct care of the insane do their duty in maintaining this interest, the insane need have no fear that the dark ages of the past will come again.

I have no desire to inflict upon you statistics, but it will be necessary, in considering the present position of Insanity, to refer briefly to a few figures and calculations, with the object of demonstrating the great importance of this disease, and the enormous sums annually expended in its treatment, in only one country—England.

In the English Lunacy Commissioners' last Report, I note that, at the end of the year 1900, there were 107,944 persons insane, in 79 County and Borough Asylums, 23 Hospitals, and 69 Private Institutions in England. Each case may be said to have cost the State say, 10/- per week for maintenance during the year, and this represents an annual expenditure of £2,816,944. Again, it may be roughly estimated that the cost of buildings, where these patients are housed, amounted to at least £200 per bed, and this represents a grand total of £21,588,800 spent in England in the erection of Asylums,—money nearly all obtained by taxation alone.

Further, when we consider the labour employed, and the amount of professional services rendered, in the care and treatment of these cases, we find that, giving one Medical man to each 500 patients, 218 doctors devote all their energy in this direction, and, giving one attendant and nurse to each 12 patients, some 4,099 men and 4,896 women, are permanently employed in Nursing these cases in English Public Institutions.

And this in England alone! What would the sums and labour represent, if all the civilised countries of the world were quoted? Even in this Colony, with its total rate-bearing population of some 600,000, I observe that, in this year's Estimates, the sum of £77,850, is devoted simply to the maintenance of the insane.

To revert to England, I would refer to the doubt there is as to the increase in the number of insane; whether an actual increase is found may be doubtful, but there can be no doubt as to a relative increase in the number of the insane, so far as those under official cognisance is concerned. Whereas, in 1860, only one out of 523 of the population was known officially to be insane, in 1890, the ratio had increased to one in every 320, and it is said that the County of London alone, has to provide accommodation for some 2,000 additional insane every 5 years! They do not build very cheaply in London, and an expenditure of some half a million every five years, for a new Asylum, must come as a shock to any ratepayer who gives the matter any thought at all.



If we view the present of insanity from the scientific standpoint, it is noted that in recent years much good work has been done in attempting to extend our knowledge of this disease. Laboratories have been established in New York, London, Edinburgh, and many of the Continental towns, for the investigation of Psych-pathological questions; lectureships have been endowed at many of the medical schools, and an enormous amount of literature,—I myself possess no less than ten text-books on Insanity alone,—has been published recently; several journals and periodicals, devoting their contents solely to the consideration of questions relating to insanity and its treatment, are published, and societies, consisting of Medical men interested in this disease and Asylum administration, exist in all civilised countries.

The modern Asylum supported by the rates and for the care and treatment of the pauper insane are, in many instances, homes of luxury. Architecturally they are ornaments to the country, the internal decorations are in the most refined taste, and the furnishing has in many cases been carried out by the firms who likewise furnish the mansions of the nobility! One county Asylum, recently erected, spent some £20,000 in ornamental tile-work alone!

With these facts before us, we may well consider that we have attained to the highest level of the fourth period of its history.—an epoch characterised by the most philanthropic ideas, and liberal.—amounting almost to extravagant expenditure, as well as by the extraordinary strides our knowledge of this disease has made, and is making.

Standing in this position on the summit, as it were, of modern progress, and having completed our view backwards, over the past of insanity, we now turn our attention for the moment to the future, and strive to see what it has in store for the insane.

Science cannot remain still; it must always be progressing, and, if we were given the gift of prophesy, we should say, that our knowledge of the mental processes will yet be made perfect; that we shall yet learn the changes that occur in the cerebral cells, that result, either in the evolution of thought, or an outburst of maniacal excitement. With such knowledge, treatment must come, and, I can fore-see many changes in the treatment of the insane, even in the near future.

The legislation must help the scientist in curing and finally eliminating this disease. This will be done by means of laws whose object shall be, "the greatest good to the greatest number." The prevention of disease and the health of the people will yet prove policies upon which Governments shall rise or fall. Already we note that in all civilised countries that most preventable disease pathosis is having some attention paid it by both the public and



the legislation, so with all other contagious affections; later, the world will have to deal with hereditary disease, by the passing of legislation; prohibiting injudicious marriages, and even perhaps sanctioning the destruction of infants known to be hereditarily tainted with disease.

Further, the most rigid economy will have to be exercised, both, as regards the furnishing and erection of Public Institutions for the insane, so that the loafer and malingerer will have no cause to sham this disease, in order to obtain a few months' luxurious board for nothing, and the treatment of insanity itself must undergo important changes, so that it may be founded upon more rational ideas, and the spirit of empiricism and superstition once for all abandoned in the care and administration of our insane and public Asylums.

The nations cannot much longer groan under this terrific burden, a burden yearly increasing, even although it should be the result of their own indiscretions. They are bound to cry out, and demand to be saved from themselves as it were. If insanity increased nearly 50 per cent during the past 30 years, one might naturally ask, how long will it be before this disease becomes universal? But before this time comes, a means for successfully combating it will be found; we are now in search of a remedy, but so long as the people refuse to lead physiologically normal lives, so long shall we fail to assist them, and unless they come to realise the importance of this question, we must invoke the aid of the legislature, to pass Acts compelling obedience to the laws of nature.

If, in 40 per cent of our cases of insanity, we can trace a hereditary tendency, surely the cure for this proportion can easily be found, and the tendency eradicated in a few generations, by legally regulating marriages; and if large proportions of the insane own their mental affliction to syphilis, or phthisis, it is just as easy eliminating these causes.

In the prevention of this most preventable disease, much must rest with the general practitioner, rather than with the specialist; all the latter can do is to point out the disease, its cause and prevention. The specialist sees only the results, while the general practitioner sees the earliest beginnings and the original causes of disease: it is for him, therefore, to combat disease before it gets too strong a hold on the body and the race, and it is for him to preach the gospel of hygienic living and common sense views of prevention, so that future races may not be cursed by a preventable disease—the burden of the present generation.

By repeated warnings, eliminate the weakest of the race, and isolate all preventable and contagious diseases, and the result will be, that there will be less work for our successors in the profession of medicine, a material decrease in the number of our insane, and a reduction in the Asylums, which are now nearly as common an object, in any civilised country, as the Hospitals,

I have finished: I have endeavoured to trace with you the earliest times of insanity—almost primitive? I have guided you through the dark and superstitious periods of the middle ages, I have described to you the awakening of science, and the evolution of kindness as a treatment in insanity, I have tried to explain to you the present position of mental diseases, and finally, I have boldly opened the doors of the future, and shown you what posterity can do, if they follow in the footsteps of those who are working in these days, and bring to a practical conclusion the theoretical investigations of our present-day workers.

If I have succeeded in awakening in you an interest in my subject I would beg of you, that this interest be one of action and not of mere wonder; each of you can help on the day, when disease shall be a memory of the past; and, for the sake of coming humanity, each of you can do much now to make them lead healthy and happy lives, which, after all, is the main object of the science of Medicine, to which we all are devoted.

THE END.





